

**FUNCHEE
VERIFIED**

8722

CERTIFICATE OF DEATH

REGISTRAR'S NO

3681

7 OF DEATH 9 AND 21 AL RESIDENCE 6414	1. PLACE OF DEATH A. COUNTY <u>Maricopa</u>			B. LENGTH OF STAY IN THIS TOWN <u>8 years</u> IN ARIZONA <u>8 years</u>		2. USUAL RESIDENCE A. STATE <u>Arizona</u>			REGISTRAR'S NO. <u>3681</u> (WHERE DECEASED LIVED. IF INSTITUTION, RESIDENCE BEFORE ADMISSION) B. COUNTY <u>Maricopa</u>			
	C. CITY OR TOWN <u>Phoenix</u>			<input checked="" type="checkbox"/> IN CITY LIMITS <input type="checkbox"/> OUTSIDE CITY LIMITS		C. CITY OR TOWN <u>Phoenix</u>			<input checked="" type="checkbox"/> IN CITY LIMITS <input type="checkbox"/> OUTSIDE CITY LIMITS			
	D. FULL NAME OF HOSPITAL OR INSTITUTION <u>2815 N. 48th Street</u>			(IF NOT IN HOSPITAL OR INSTITUTION, GIVE STREET ADDRESS OR LOCATION)			D. STREET (IF RURAL, GIVE LOCATION) ADDRESS <u>1517 E. Coulter</u>			E. IS RESIDENCE ON A FARM? <u>YES</u> <input type="checkbox"/> <u>NO</u> <input type="checkbox"/>		
	3. NAME OF DECEASED (TYPE OR PRINT) <u>Mary P. Willoughby</u>			A. (FIRST) <u>Mary</u> B. (MIDDLE) <u>P.</u> C. (LAST) <u>Willoughby</u>		4. SEX <u>Fe.</u> 5. COLOR OR RACE <u>White</u>		6A. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) <u>Married</u>				
PRECEDENT PERSONAL DATA 4 661 4900 CAUSE OF DEATH (ITEM 18) 0 0	6B. NAME OF SPOUSE <u>Louis C. Willoughby</u>			7. DATE OF BIRTH MONTH <u>8</u> DAY <u>21</u> YEAR <u>1886</u>		8. AGE (IN YEARS LAST BIRTHDAY) <u>75</u>		IF UNDER 1 YEAR <u>MONTHS</u> <u>0</u> DAYS <u>0</u>		IF UNDER 24 HRS. <u>HOURS</u> <u>0</u> MIN. <u>0</u>		
	9B. KIND OF BUSINESS OR INDUSTRY <u>--</u>			10. BIRTHPLACE (STATE OR FOREIGN COUNTRY) <u>North Carolina</u>		11. CITIZEN OF WHAT COUNTRY? <u>U.S.A.</u>		12. WAS DECEASED EVER IN U. S. ARMED FORCES? <u>NO</u>		13. SOCIAL SECURITY NO. <u>NO</u>		
	14A. FATHER'S NAME <u>Alexander Partin</u>			14B. BIRTHPLACE (STATE OR COUNTRY) <u>North Carolina</u>		15A. MOTHER'S MAIDEN NAME <u>Medora Harrison</u>			15B. BIRTHPLACE (STATE OR COUNTRY) <u>North Carolina</u>			
	16. INFORMANT'S SIGNATURE <u>Louis Willoughby</u>			ADDRESS <u>1517 E. Coulter</u>			17. DATE OF DEATH <u>10</u> (MONTH) <u>28</u> (DAY) <u>61</u> (YEAR)		18. CAUSE OF DEATH ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), (C). THIS DOES NOT MEAN THE MODE OF DYING, SUCH AS HEART FAILURE, ASTHENIA, ETC. IT MEANS THE DISEASE, INJURY, OR COMPLICATION WHICH CAUSED DEATH.			
OPERATIONS, AUTOPSY 4	19A. DATE OF OPERATION			19B. MAJOR FINDINGS OF OPERATION			20. AUTOPSY? <u>YES</u> <input type="checkbox"/> <u>NO</u> <input checked="" type="checkbox"/>					
	21. I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM <u>5-6-59</u> TO <u>10-28-61</u> THAT I LAST SAW THE DECEASED <u>1:07 A.</u>			ALIVE ON <u>10-26-61</u> AND THAT DEATH OCCURRED AT <u>1:07 A.</u>			M. FROM THE CAUSES AND ON THE DATE STATED ABOVE.					
	22A. SIGNATURE <u>D. J. Haywood MD</u>			(DEGREE OR TITLE) <u>MD</u>			22B. ADDRESS <u>Phoenix, Arizona</u>					
	22C. DATE SIGNED <u>10-30-61</u>			22D. SIGNATURE			(DEGREE OR TITLE)					
DEATH DUE TO EXTERNAL VIOLENCE 0	23A. ACCIDENT SUICIDE HOMICIDE <u>NATURAL CAUSE</u>			23B. PLACE OF INJURY (E.G., IN OR ABOUT HOME, FARM, FACTORY, STREET, OFFICE BLDG., ETC.)			23C. (CITY OR TOWN) (COUNTY) (STATE)					
	23D. TIME (MONTH) (DAY) (YEAR) (HOUR)			23E. INJURY OCCURRED <u>WHILE AT WORK</u> <input type="checkbox"/> <u>NOT WHILE AT WORK</u> <input type="checkbox"/>			23F. HOW DID INJURY OCCUR?					
	24A. CORONER'S SIGNATURE			24B. ADDRESS			24C. DATE SIGNED					
	25A. BURIAL <input checked="" type="checkbox"/> CREMATION <input type="checkbox"/> REMOVAL <input type="checkbox"/>			25B. DATE <u>10-30-61</u>			25C. NAME OF CEMETERY OR CREMATORY <u>Greenwood Cemetery</u>					
FUNERAL DIRECTOR AND REGISTRAR 108	25D. LOCATION (CITY, TOWN, OR COUNTY) (STATE) <u>Phoenix Arizona</u>			26A. DATE REC. BY LOCAL REG. <u>10/30/61</u>			26B. REGISTRAR'S SIGNATURE <u>Buried</u>					
	26C. DATE REC. BY LOCAL REG.			26D. REGISTRAR'S SIGNATURE			27A. FUNERAL DIRECTOR'S SIGNATURE <u>A. L. ...</u>					
	26E. DATE REC. BY LOCAL REG.			26F. REGISTRAR'S SIGNATURE			27B. ADDRESS <u>Phoenix</u>					
	26G. DATE REC. BY LOCAL REG.			26H. REGISTRAR'S SIGNATURE			27C. ADDRESS					